

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT	69607	11/2/99
O.I.P.E. CLASSIFIER		8	11-10-99
FORMALITY REVIEW	CH	71423	11-28-99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 (Through numeral) Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
11	8/2
12	9/2
13	10/2
14	11/2
15	12/2
16	1/2
17	2/2
18	3/2
19	4/2
20	5/2
21	6/2
22	7/2
23	8/2
24	9/2
25	10/2
26	11/2
27	12/2
28	1/2
29	2/2
30	3/2
31	4/2
32	5/2
33	6/2
34	7/2
35	8/2
36	9/2
37	10/2
38	11/2
39	12/2
40	1/2
41	2/2
42	3/2
43	4/2
44	5/2
45	6/2
46	7/2
47	8/2
48	9/2
49	10/2
50	11/2

Claim	Date
Final Original	
51	12/2
52	1/2
53	2/2
54	3/2
55	4/2
56	5/2
57	6/2
58	7/2
59	8/2
60	9/2
61	10/2
62	11/2
63	12/2
64	1/2
65	2/2
66	3/2
67	4/2
68	5/2
69	6/2
70	7/2
71	8/2
72	9/2
73	10/2
74	11/2
75	12/2
76	1/2
77	2/2
78	3/2
79	4/2
80	5/2
81	6/2
82	7/2
83	8/2
84	9/2
85	10/2
86	11/2
87	12/2
88	1/2
89	2/2
90	3/2
91	4/2
92	5/2
93	6/2
94	7/2
95	8/2
96	9/2
97	10/2
98	11/2
99	12/2
100	1/2

Claim	Date
Final Original	
110	2/2
111	3/2
112	4/2
113	5/2
114	6/2
115	7/2
116	8/2
117	9/2
118	10/2
119	11/2
120	12/2
121	1/2
122	2/2
123	3/2
124	4/2
125	5/2
126	6/2
127	7/2
128	8/2
129	9/2
130	10/2
131	11/2
132	12/2
133	1/2
134	2/2
135	3/2
136	4/2
137	5/2
138	6/2
139	7/2
140	8/2
141	9/2
142	10/2
143	11/2
144	12/2
145	1/2
146	2/2
147	3/2
148	4/2
149	5/2
150	6/2

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)